**ALABAMA DEPARTMENT OF MENTAL HEALTH (ADMH)
DIVISION OF DEVELOPMENTAL DISABILITIES (DDD)**

New Provider Orientation
Home & Community Based Medicaid Waiver Services

February 25, 2021

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ADMH DD Division

The DDD provides oversight to delivering an array of Medicaid Waiver services for individuals with developmental disabilities to live independently in their community.

Federal regulations provide specific guidelines for delivery of these services and protect the rights of individuals to live in the community, not an institution.

Services provided through the DDD Medicaid waivers are funded with state and federal dollars.

Individuals served through the Medicaid waivers must meet certain eligibility criteria and be eligible for Medicaid.

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ADMH Vision for Services

- Keeping families together
- Supporting individuals in their communities where friends and families are
- Supporting individuals to obtain employment
- Supporting independent living
- Emphasizing community integration
- Supporting individuals to hire their own staff for certain services (self-directed)
- Providing services before individuals are in crisis

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Services That Best Support People In Their Home & Community

- Personal Care
- Community day services (non-facility day)
- Employment Services
- Companion services
- Community Experience
- Companion Services
- Self-Directed Services
- Respite (in & out of home)
- Supported Living
- Assistive Technology

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Consider This Before You Apply

- There are 646 vacancies in residential homes (16% vacancy rate) What will you do if no one chooses your group home?
- 5 facility-based day services closed permanently in 2020 (many remain closed due to COVID-19)
- Providers report a 42% staff turnover rate. How will you ensure required staff capacity?

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Community Waiver Program (CWP)

The CWP is an innovative approach to services provided in Alabama. Some goals of the program are to:

- Eliminate the wait list
- Support individuals to live with their families
- Support individuals to live independently in their own home or apartment
- Support individuals to obtain employment
- Bring services to individuals when and where needed

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Community Waiver Program (CWP)

- ADMH will implement new waiver program 4/1/21
- Current program limited to pilot counties for limited number of individuals
- Number of individuals served in traditional Medicaid waivers will decline as CWP expands

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Home and Community Based Settings (HCBS) Rule

A federal regulation that defines standards for settings where Medicaid services are provided using federal funds. States have until March 2023 to bring all existing HCBS settings into compliance with the standards in the rule.

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HCBS Settings Rule Standards

- ALL providers MUST be in full compliance with the HCBS Rule
- New providers MUST be in full compliance the FIRST DAY they deliver services
- ALL providers MUST operate under the same state and federal regulations, ensuring full compliance with standards that measure the quality of services provided

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HCBS Setting Standards (continued)

- State must ensure, through person centered planning, the setting is selected by the individual, based on needs and preferences
  - Residential setting also based on individual's resources
  - Setting options offered must include non-disability specific settings
  - Setting options offered, from which the person selected, must be identified and documented in the Person Centered Plan

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Person Centered Planning

- All individuals receiving HCBS waiver services must have a Person-Centered Plan developed by an unbiased party to ensure there is no conflict of interest
- In October 2020, ADMH completed its transition to a conflict free Support Coordination state
- Support Coordination agencies are now responsible for Person Centered Planning and advocacy on behalf of individuals served through the HCBS waivers
- Person Centered Plans MUST address the HCBS rule requirements

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ID and LAH Services Needed for HCBS Waivers

- Crisis Intervention
- Day Habilitation, Community Based
- Employment
  Job Developer
  Job Coach
- Out of Home Respite
- Personal Care
- Behavior Supports
- Nursing

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Regional Community Services (RCS) Offices

- Region I — Decatur
- Region II — Tuscaloosa
- Region III — Mobile
- Region IV — Montgomery
- Region V — Birmingham

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Services Provided Include (but not limited to):

- Hourly Services:

  A. Personal Care: Assistance with activities of daily living (ADL) in accordance with treatment plan

  B. Companion: Support/supervision in non-medical care

  C. Respite: Short term, temporary relief for unpaid caregiver (in/out of family home)

- Supported Employment: Support to perform in a competitive work setting (paid work)

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Services Provided Continued:

- Residential Services: Care/supervision, skill training in individual's residence or in a certified community setting
- Day Habilitation: Planning, training, support to increase independent functioning, and build skills to influence change in behavior

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Application/Approval Process

- Complete online course
- Attend live perspective provider orientation class
- Complete application packet
- Forward completed application packet to Certification Administration within 1 year
- Forward background check to BSI
  - Must not have convictions or pending charges for any crime of violence
  - Must not have any felony convictions/pending felony arrests
  - See Operational Guidelines for additional criminal activities that will permanently disqualify eligibility

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Application/Approval Process (Cont.):

- Certification Administration forwards completed packet & background checks to DD Certification
- DD Certification reviews packet info & makes recommendations
- Application may not be approved for
  - Unfavorable background check for Executive Director (ED) (can reapply with new ED)
  - Falsification of information (cannot apply again)
  - Lack of educational background for Executive Director (can reapply with new ED)
  - Lack of required experience (5 yrs.) for Executive Director (can reapply with new ED)
  - Application reviewed 3 times
  - Pattern of substantiated incidents of abuse, neglect, mistreatment, and exploitation
  - Setting does not meet HCBS Settings Rule (can reapply with new setting)

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Application/Approval Process (Cont.)

- Application may not be approved for (continued)
  - Presence on the Medicaid Exclusion List
  - Agency has demonstrated an inability to take on added responsibility of additional setting or service (can reapply after next two favorable full reviews)
    - Provisional Certification
    - Extended TOA (s)
  - Previously Decertified
  - Inappropriate name for organization (can reapply with favorable name)
  - Medicaid fraud
- DD Certification Recommends Temporary Operating Authority (TOA)

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Application/Approval Process (Cont.)

- §1500 application fee due upon approval of application (cashier's check)
- Applicant contacts Regional Office to observe potential settings
- Office of Life Safety inspects physical setting (residential & day settings)
- Temporary Operating Authority (TOA) issued

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ADMH DD Division

- TOA – Temporary Operating Authority
  - Licensed to do business with ADMH
  - Does **NOT** guarantee a contract with ADMH
  - TOA only good for **6 months**

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Application/Approval Process (Cont.)

- TOA Certificate to RCS Office & Local 310 (Support Coordination) Agency
- Provider on Free Choice of Provider List
- 310 Single Point of Entry
- Waiting List for Services

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Application/Approval Process (Cont.)

- RCS trains provider on billing once selected for services
- Certification reviews agency within 6 months of provider's selection for services
- Monitoring: Advocacy, RCS, Support Coordination

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Provider Requirements

- See ADMH Administrative Code Chapter 580-5-30 & DD Operational Guidelines
- Bachelor's degree from accredited institution
- 5 yrs. expertise/experience working w/ persons w/ an intellectual disability
- Independent Board of Directors/Executive Committee
- 90-day cash reserve operating fund

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Provider Requirements (Cont.):

- Agency Policies – ADMH Standards
- Committee Access – Human Rights Committee (HRC), Behavior Program Review Committee (BPRC), Incident Program Management System (IPMS)
- Personnel Requirements:
  - Qualified Developmental Disabilities Professional (QDDP)
  - Medication Assistance Supervising (MAS) Nurse (medication administration)
- See Packet for Additional Documents to be Included
- Provider must meet all HCBS Settings Rule criteria except for the Individual Experience Assessment prior to individual's service date

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- $$ Funding $$
- 30% - State; 70% - Federal Match
- Rate Determined by IRBY Score
  (Individual Residential Behavioral Inventory)
- Social Security/SSI Funds (Housing)
- Ways to Contract: Direct or Subcontract

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Fiscal Management

- **May Be Subject To Audit Requirements**
  - o $300,000 or more of DMH Funding
  - o Compliance or governmental audit must be prepared by a CPA
  - *https://mh.alabama.gov//chief-of-staff* (Office of Internal Audit)

- **Administrative Needs In Managing Contract**
  - o Financial Management
    - *Who will perform critical functions?
      - *Will you need to hire or contract for assistance?
  - o Record Keeping
    - *Individual and financial records must be available upon request
      - *Records must be maintained for 5 fiscal years
  - o Maintain inventory of supplies when funds are provided to purchase supplies
  - o You are responsible for managing the financial well-being of your organization

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Fiscal Management

- **Billing Medicaid**
  - o Training on ADIDIS
  - o Proper knowledge & documentation/records to support billing
    (Medicaid Billing Manual)
  - o Internal Controls- signatures by individuals served, support personnel, and executive/administrative approval are some recommended best practices

- **Managing Individual's Funds**
  - o Must follow SSA guidelines for representative payees
    (*https://www.ssa.gov>pubs*)
  - o Must keep receipts, ledgers & develop a system to track funds
  - o Must provide financial statements/updated leger to beneficiary at least quarterly
  - o Beneficiary should have access to funds & be involved in budgeting personal funds
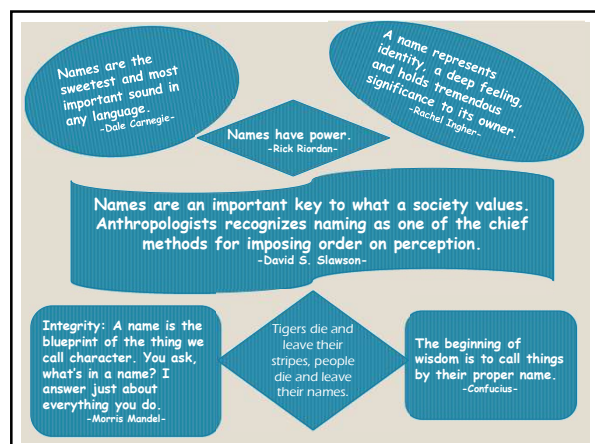
*** READ YOUR CONTRACT- defines services to be provided, financial arrangements, record keeping requirements, reporting requirements, subcontractor terms, lobbying terms debarment laws and other provisions. ***

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- Important Documents to Review
  - ADMH Administrative Codes Chapter 580-5-30 &
    DD Operational Guidelines
  - ADMH DD Division Assessment Tool for Certification Reviews
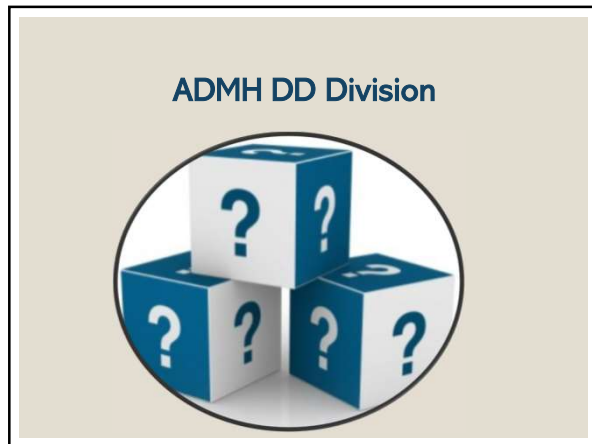 - ADMH Community Incident Prevention and Management System (IPMS)

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